832001 12-18-08

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-0047 108

Open to Public Inspection

Α	For the	= 2008 calendar year, or tax year beginning $$	JUN 30, 2009	
В	Check if applicable	Please use IRS	D Employer identific	cation number
	Addre	ss label or REDLANDS COUNTRY CLUB		
	Name chang initial	Doing Business As		427554
	re tum Termir ation	See Number and street (or P 0 box if mail is not delivered to street address) Room/s See Number and street (or P 0 box if mail is not delivered to street address) Room/s) 793–2661
	Amend retum Applic	City or town, state or country, and ZIP + 4	G Gross receipts \$	5,431,403.
<u> </u>	Itiòn pendir	REDUANDO, CA 32373-7240	H(a) Is this a group re for affiliates?	Yes X No
		1 Marile and address of principal officer.	H(b) Are all affiliates inc	
T	Tax-exe	empt status: X 501(c) (7)		list. (see instructions)
J.	Websit	e: ► WWW.REDLANDSCOUNTRYCLUB.COM	H(c) Group exemption	number -
			ear of formation 1946 N	State of legal domicile CA
P		Summary		
Activities & Governance	1	Briefly describe the organization's mission or most significant activities: FELLOWSH	IP FOR CLUB M	EMBERS
erne	2	Check this box If the organization discontinued its operations or disposed of n	nore than 25% of its assets	3.
õ	3	Number of voting members of the governing body (Part VI, line 1a)	3	9
প্র	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	9
ë	5	Total number of employees (Part V, line 2a)	5	117
Ξ	1	Total number of volunteers (estimate if necessary)	6	206 701
AC	1	Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a	386,791.
<u> </u>	<u> </u>	Net unrelated business taxable income from Form 990-T, line 34	7b	0.
3	8	Contributions and grants (Part VIII, Injectif)	Prior Year	Current Year
Revenue	1	Program service revenue (Part VIII, Infe2b)	4,166,570.	3,052,055.
Š	10	Investment income (Part VIII, column A) Investment income (Part VIII, column A)	4,743.	<919.
ď	11	Other revenue (Part VIII, column (A)/ lines 5, 6d, 8c, 9c, 10c, and 11e)	1,351,877.	1,530,314.
		Total revenue - add lines 8 through 11 (must@gpail.Part.VIII, columnat), line 12)	5,523,190.	4,581,450.
		Grants and similar amounts paid (Part IX, column (A) lines (1.3)		
		Benefits paid to or for members (Part IX, column (A), line 4)		
S	د ا	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5·10)	2,435,623.	2,442,482.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		
×	p.	Total fundraising expenses (Part IX, column (D), line 25)		
Ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	2,100,236.	2,634,919.
	J	Total expenses. Add lines 13-17 (must equal Part iX, column (A), line 25)	4,535,859.	5,077,401.
	19_	Revenue less expenses. Subtract line 18 from line 12	987,331.	<495,951.
Net Assets or Fund Balances			Beginning of Year	End of Year
Sset	20	Total assets (Part X, line 16)	8,865,962.	8,511,915.
et A	21	Total liabilities (Part X, line 26)	2,064,071. 6,801,891.	2,205,975. 6,305,940.
		Net assets or fund balances. Subtract line 21 from line 20 Signature Block	0,001,091.	6,305,940.
	art II	Under penalties of penury, I declare that I have examined this return, including accompanying schedules and stateme	nts, and to the best of my knowledge	e and belief, it is true, correct.
	ł	and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowle	dge	
Sig	_	Med tomo	<i> 0</i>	114/09
Her		Signaturé of officer	Date	7, 17-7
1101	۱	JOSEPH FONZO TREASURER		
	ŀ	Type or print name and title		
Palo	1	Preparer's signature A A A A A A A A A A A A A A A A A A A	self- (see ins	r's identifying number tructions)
Pre	parer's	Firm's name (or FADIE AND PAYNE LXP	employed ►	
Use	Only	yours if self-employed), P.O. BOX 1008	LIN	
	ļ	address, and REDLANDS, CA 92373	Phone no > 10	909)793-2406
Mar.	the IP	S discuss this return with the preparer shown above? (see instructions)	Thone no P (-	X Yes No
1110	, 410 111	C disease this folder with the property shows above 1900 mandalana		

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice]
	on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7_		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide	ļ		
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes, " complete Schedule D, Part IV	_9		X
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25?			
	If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	X	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was			
	prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	_X_	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity			
	located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18_		X
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	_	X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 on Part IX, column (A), line 27 If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23	X	
24 a				
	last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K			
	If "No", go to question 25	24a		<u>X</u>
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary penod exception?	24b	_	
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
_	disqualified person during the year? If "Yes," complete Schedule L, Part I	25 a		
Þ	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a			
	pnor year? If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified	_		v
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial			Х
	contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27	000 "	
		Form	コヨリ (2	∠UU8)

Part IV Checklist of Required Schedules (continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an			
	indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other			
	person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a		_X_
b	Have a family member who had a direct or indirect business relationship with the organization?			
	If "Yes," complete Schedule L, Part IV	28b		X_
c	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional			
	corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			i l
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			i l
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		_X_
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?		[
	If "Yes," complete Schedule R, Part V, line 2	35		_X_
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<u>X</u>

	1990 (2008) REDLANDS COUNTRY CLUB 95-1427	554	<u> </u>	Page 5
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1 a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns Enter -0- if not applicable	_		
b	Enter the number of Forms W-2G included in line 1a. Enter ·0· if not applicable	1		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		Х
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 117	<u>'</u>]		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3 a	X	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country:			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and			
	Financial Accounts.			
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited			
	Tax Shelter Transaction?	5c		
6 a	Did the organization solicit any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			ĺ
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	ļ	<u> </u>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required]	1
	to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			į
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			1
	benefit contract?	7e		<u> </u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		<u> </u>
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		ļ
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3)			ĺ
	supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have			ĺ
	excess business holdings at any time during the year?	8		
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.	1		ĺ
а	Did the organization make any taxable distributions under section 4966?	9 a		——
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	<u> </u>	
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12 10a 121,014.			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 386, 791.			į
11	Section 501(c)(12) organizations. Enter: N/A			į
a	Gross income from members or shareholders 11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them t	, ,		

Form 990 (2008)

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

95-1427554 REDLANDS COUNTRY CLUB Form 990 (2008) Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.) Section A. Governing Body and Management Yes No For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances,

	· · · · · · · · · · · · · · · · · · ·			1		
	processes, or changes in Schedule O. See instructions.	1			[
1 a	Enter the number of voting members of the governing body	1a	9			
b	Enter the number of voting members that are independent	1b	9	1	ŀ	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with any other				
	officer, director, trustee, or key employee?		2			X
3	Did the organization delegate control over management duties customarily performed by or under the	direct supervision				
	of officers, directors or trustees, or key employees to a management company or other person?		3			Х
4	Did the organization make any significant changes to its organizational documents since the prior For	m 990 was filed?	4			X
5	Did the organization become aware during the year of a material diversion of the organization's assets		5		Х	
6	Does the organization have members or stockholders?		6	T	Х	
7a	Does the organization have members, stockholders, or other persons who may elect one or more mer	nbers of the				
	governing body?		78	a	Х	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other pers	ons?	71	,	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken of	luring the year		T		
	by the following:	-				
а	The governing body?		88	1	x	
b	Each committee with authority to act on behalf of the governing body?		81	,	Х	
9 a	Does the organization have local chapters, branches, or affiliates?		96	1		X
	If "Yes," does the organization have written policies and procedures governing the activities of such of	hapters, affiliates,		7		
	and branches to ensure their operations are consistent with those of the organization?		91	,	- 1	

Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990 10 Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O

Section B. Policies

12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12 a	Х	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
	to conflicts?	12b	X	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this is done	12c	Х	
13	Does the organization have a written whistleblower policy?	13		Х
14	Does the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision:			
а	The organization's CEO, Executive Director, or top management official?	15 a	X.	
b	Other officers or key employees of the organization?	15b	X	
	Describe the process in Schedule O. (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		

e.	action	^	Disclosure
	ecnon		Disclosure

	List the states with which a copy of this Form 990 is required to be filed	\sim	. 7	۸
17	I ist the states with which a copy of this Form 990 is required to be tiled ■	~		

- Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
 - Another's website X Upon request Own website
- Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization. BETTY RIVERO -(909)793-2661

1749 GARDEN STREET, REDLANDS, 92373-7248

Form 990 (2008)

Yes No

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average	,	Position		Position heck all that apply)		dy)	Reportable compensation	Reportable	Estimated amount of
	hours per week	Individual trustee or director	_	K all Ottlogr	Key employee	Highest compensated emologe		from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
DAVE FERGUSON		\vdash	+-			1	<u> </u>	 		
PRESIDENT	1.00	X		X				0.	0.	0.
TOM LYNARD		T								
VICE PRESIDENT	1.00	X		X		1	l	0.	0.	0.
BRUCE BARTELLS			<u> </u>							
SECRETARY	1.00	X		X		ŀ	l	0.	0.	0.
BRIAN LONG										
TREASURER	1.00	X		X			İ	0.	0.	0.
ANDY BEETS		Γ								
DIRECTOR	1.00	X					_	0.	0.	0.
CHRIS BRADISH										
DIRECTOR	1.00	X				L		0.	0.	0.
MICHAEL KAISER				1		ĺ				1
DIRECTOR	1.00	X	<u> </u>			_	<u> </u>	0.	0.	0.
RON PERRY					Ì	Ì			_	
DIRECTOR	1.00	X	↓_			<u> </u>	<u> </u>	0.	0.	0.
EŬGENE VANN			l	}]				•
DIRECTOR	1.00	X	├			├	<u> </u>	0.	0.	0.
BRUCE ZAHN	40.00	1			,,	l	ļ	190 633	0	12 161
GENERAL MANAGER	40.00				Х			180,632.	0.	13,161.
			-			_				
			-							
					ļ		_			
		-								

Pa	t VII Section A. Officers, Directors, Tru		mple	oyee			High	est				-		
(A)		(B)				C)			(D)	(E)			(F)	
	Name and title	Average hours	100	hecl	Pos			dy)	Reportable compensation	Reportable compensation			stimat mount	
		per week	r director	Institutional frustee		Кеу епріоуее	Highest compensated emolowee		from the organization (W-2/1099-MISC)	from relate organization (W-2/1099-MI	d ns	con f orç an	other npensa rom th ganizat d relat	ation e tion ted
								_						
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1 <u>b</u>	Total					*b.o.	- \$1	00.4	180,632.		0.	<u>T</u>	3,1	<u>ρΙ</u> ,
2	Total number of individuals (including those compensation from the organization	n raj wno red	ceive	ea m	lore	ına	ויקטוו	UU,	000 in reportable		•			1
	somponioanon mem the erganization						_						Yes	No
3	Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s		stee	, key	y em	plo	yee,	or h	nighest compensated en	nployee on		3_		х
4	For any individual listed on line 1a, is the su and related organizations greater than \$150	•							•	the organization		4	х	
5	Did any person listed on line 1a receive or a									ces rendered to				
	the organization? If "Yes," complete Schedition B. Independent Contractors	ule J for such j	oe <i>r</i> s	on								5_	<u></u>	<u>X</u>
1	Complete this table for your five highest countries organization.	mpensated inc	depe	nde	nt c	ontr	acto	rs t	hat received more than	\$100,000 of con	npens	ation :	from	
	(A)								(B)			((C)	
	Name and business	address	<u>_</u> _						Description of s	ervices	C	ompe	nsatio	n —
							_				·- <u>-</u>			
		<u> </u>		_							_			
					_									
2	Total number of independent contractors (in from the organization	ncluding those	ın 1) wh	o re	celv	/ed r	nor	e than \$100,000 in com	pensation				
											_		aan e	2008

832009 02-02-09

Other Revenue

Form 990 (2008)

Part VIII

Contributions, gifts, grants and other similar amounts

Program Service Revenue

Royalties

51409DL1

<1,889.>

11,620.

386,791.

713910

713910

323100

148,931.

100,236.

11,620.

260,787.

,581,450.4,196,548.

148,931

100,236.

d All other revenue

11 a MISCELLANEOUS

c NEWSPAPER ADS

Total. Add lines 11a-11d

INTEREST ON MEMBER ASS

Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B) (C) a

	All other organizations must comp				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				A
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22		·		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members	· · · · · · · · · · · · · · · · · · ·			
5	Compensation of current officers, directors,	207 555			
_	trustees, and key employees	207,555.			-
6	Compensation not included above, to disqualified			Į.	
	persons (as defined under section 4958(f)(1)) and	n .			
7	persons described in section 4958(c)(3)(B)	1,970,078.			
7 8	Other salaries and wages Pension plan contributions (include section 401(k)	1,570,070.			
0	and section 403(b) employer contributions)				
9	Other employee benefits	81,285.		-	
10	Payroll taxes	183,564.			
11	Fees for services (non-employees):				
	Management	ļ			
b	Legal	19,764.			
c	Accounting	33,643.			
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion	30,627.			
13	Office expenses				
14	Information technology				
15	Royalties	200 160			_ _
16	Occupancy	398,168.			
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	01 005			
20	Interest	91,895.			
21	Payments to affiliates	375,234.			
22 23	Depreciation, depletion, and amortization insurance	290,786.			
23 24	Other expenses Itemize expenses not covered	2307700.			
4	above (Expenses grouped together and labeled				
	miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
а	BAD DEBT EXPENSE	493,467.			
b	EQUIPMENT RENTAL & MAIN	236,091.			
c	SUPPLIES	185,670.			
d	GOLF COURSE REPAIRS	150,831.			
е	LAUNDRY	71,730.			
f	All other expenses	257,013.			
25	Total lunctional expenses. Add lines 1 through 24f	5,077,401.			
26	Joint Costs. Check here ▶ ☐ If following				
	SOP 98-2 Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				

Part X **Balance Sheet** (A) Beginning of year End of year 1 Cash - non-interest-bearing 433,943. 926,861. 2 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 1,733,780. 566,581. 4 Accounts receivable, net 5 Receivables from current and former officers, directors, trustees, key 5 employees, or other related parties. Complete Part II of Schedule L Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L 1,390,875. 1,310,719. 212,382. 111,272. Notes and loans receivable, net Assets 234,331. Inventories for sale or use 8 68,623. Prepaid expenses and deferred charges 9,594,238. 10a 10a Land, buildings, and equipment: cost basis b Less: accumulated depreciation. Complete 4,914,726. 4,392,967. 5,201,271. Part VI of Schedule D 10b 10c 11 Investments - publicly traded securities 11 88,334. 72,829. 12 12 Investments - other securities. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11 13 14 Intangible assets 14 1,350. 110,000. 15 Other assets. See Part IV, line 11 8,865,962. 584,356. 8,511,915. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 526,014 17 17 Accounts payable and accrued expenses 18 18 Grants payable 224,960 221,359. 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow account liability. Complete Part IV of Schedule D 21 Liabilities 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 1,254,755. 1,458,602. Secured mortgages and notes payable to unrelated third parties 23 23 24 Unsecured notes and loans payable 24 25 Other liabilities, Complete Part X of Schedule D 25 2,064,071. 2,205,975. 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here

X
and complete Net Assets or Fund Balances lines 27 through 29, and lines 33 and 34. 6,123,306. 182,634. 5,566,857. 27 Unrestricted net assets 1,235,034. 28 Temporarily restricted net assets 28 Permanently restricted net assets Organizations that do not follow SFAS 117, check here

and complete lines 30 through 34. Capital stock or trust pnncipal, or current funds 30 31 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 6,801,891. 6,305,940. 33 33 Total net assets or fund balances 8,865,962 8,511,915. Total liabilities and net assets/fund balances Part XI Financial Statements and Reporting Yes No X Accrual Other Accounting method used to prepare the Form 990. ____ Cash 2a Were the organization's financial statements compiled or reviewed by an independent accountant? Х **2**a X b Were the organization's financial statements audited by an independent accountant? 2b c If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, X review, or compilation of its financial statements and selection of an independent accountant? 2c 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit X Act and OMB Circular A-133? 3a b If "Yes," did the organization undergo the required audit or audits? 3ь

11

Schedule D

·(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

▶ Attach to Form 990. To be completed by organizations that

Employer identification number

Name of the organization

answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

	REDLANDS COUNTRY C	95-1427554	
Pa	rt I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds	or Accounts. Complete if the
<u> </u>	organization answered "Yes" to Form 990, Part IV, lin	ne 6.	
	· · · · · · · · · · · · · · · · · · ·	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4			
5	Aggregate value at end of year	writing that the appate hold in depar advise	ad funds
3	Did the organization inform all donors and donor advisors in		Yes No
	are the organization's property, subject to the organization's		
6	Did the organization inform all grantees, donors, and donor a	• • • • • • • • • • • • • • • • • • • •	·
FD.	for charitable purposes and not for the benefit of the donor		
Pa			art IV, line /
1	Purpose(s) of conservation easements held by the organizat		
	Preservation of land for public use (e.g., recreation or	pleasure) Preservation of an hist	orically important land area
	Protection of natural habitat	Preservation of certifie	d historic structure
	Preservation of open space		
2	Complete lines 2a-2d if the organization held a qualified cons	servation contribution in the form of a cons	ervation easement on the last day
	of the tax year.		
			Held at the End of the Year
а	Total number of conservation easements		2 a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic sti	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 8/17/06	2d
3	Number of conservation easements modified, transferred, re		organization during the taxable
	year▶	,	3
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the pe		d
•	enforcement of the conservation easements it holds?	mode morning, map deticn, vicialiene, an	Yes No
6	Staff or volunteer hours devoted to monitoring, inspecting, a	and enforcing easements during the year	
7	Amount of expenses incurred in monitoring, inspecting, and		
8	•		-V4V(P)(0)
0	Does each conservation easement reported on line 2(d) about	ve satisfy the requirements of section 170(i	(4)(b)(i)
	and section 170(h)(4)(B)(ii)?		
9	In Part XIV, describe how the organization reports conservat		
	include, if applicable, the text of the footnote to the organiza	ition's financial statements that describes t	ne organization's accounting for
P.	conservation easements.	4 A. Historical Transpurse on Ot	hau Cimilau Assata
Pa	organizations Maintaining Collections o	· · · · · · · · · · · · · · · · · · ·	ner Similar Assets.
—	Complete if the organization answered "Yes" to Form	1990, Part IV, line 6.	
1a	If the organization elected, as permitted under SFAS 116, no		
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of pub	lic service, provide, in Part XIV, the text of
	the footnote to its financial statements that describes these	items.	
b	If the organization elected, as permitted under SFAS 116, to	report in its revenue statement and balance	e sheet works of art, historical treasures,
	or other similar assets held for public exhibition, education, of	or research in furtherance of public service,	provide the following amounts relating to
	these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		> \$
	(ii) Assets included in Form 990, Part X		► \$ ► \$
2	If the organization received or held works of art, historical tre	asures, or other similar assets for financial	
	the following amounts required to be reported under SFAS 1		
а	Revenues included in Form 990, Part VIII, line 1	· · ·	▶ \$
	Assets included in Form 990, Part X		► \$ ► \$
J	, 1000 to mindedd mi'r driff ddd, i dich		· · ·
LHA	For Privacy Act and Paperwork Reduction Act Notice, see	e the Instructions for Form 990.	Schedule D (Form 990) 2008

Sche	edule D (Form 990) 2008 REDLAND	S COUNTRY	CLUB					95-14	2755	Page 2
	rt III Organizations Maintaining C	collections of A	rt, Hist	orical Tr	reasures,	or Oth				
3	Using the organization's accession and othe									
	that apply):	·	•	Ū	_				,	
а	Public exhibition		a 🗀 i	oan or exc	hange prog	rams				
b	Scholarly research			_	J., J.					
С	Preservation for future generations		_						-	
4	Provide a description of the organization's co	ollections and expla	in how th	ev further t	he organizat	lion's exe	emot puro	ose in Pai	t XIV	
5	During the year, did the organization solicit of				_			000	. ,	
_	to be sold to raise funds rather than to be ma						430010		Yes	☐ No
Pa	rt IV Trust, Escrow and Custodial					ered "Ye	s" to Forn	n 990. Pai		
	reported an amount on Form 990, Par		· · ·	- · · · · · · · · · · · · · · · · · · ·					,	.,
1a	Is the organization an agent, trustee, custod	an or other interme	diary for o	contribution	ns or other a	ssets not	Included			
	on Form 990, Part X?								Yes	No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollowing t	able:						
	,	•	J						Amount	
С	Beginning balance						1c			
d	A 1.1.						1d			
е	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on Fe	orm 990, Part X, line	21?						Yes	No
	If "Yes," explain the arrangement in Part XIV.									
Pa	T V Endowment Funds. Complete it	f organization answ	ered "Yes	to Form 9	990, Part IV,	line 10.			-	
		(a) Current year	(b) Pr	or year	(c) Two year	rs back	(d) Three y	ears back	(e) Four	years back
1a	Beginning of year balance									***************************************
b	Contributions									
С	Investment earnings or losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance	_								
2	Provide the estimated percentage of the year	r end balance held a	as:							
а	Board designated or quasi-endowment		%							
b	Permanent endowment ▶	%								
С	Term endowment ▶	%								
3 a	Are there endowment funds not in the posse	ssion of the organiz	ation that	are held a	nd administe	ered for t	he organız	ation	_	
	by:									Yes No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(II), are the related organizations	listed as required o	on Schedu	ule R?					3b	
4	Describe in Part XIV the intended uses of the									
Par	t VI Investments - Land, Building	s, and Equipm	ent. See	Form 990	, Part X, line	10				
	Description of investment	(a) Cost or o		(b) Cost		(c) D	epreciatio	n	(d) Book	value
		basis (investr		basis ((other)					222
1a	Land	229,						<u> -</u>	229	,329.
b	Buildings	5,068,	1001			1,6	532,3	45.	3,435	,755.
	Leasehold improvements	2 245	020				126 6			0.40
	Equipment	2,045,					136,98			940.
	Other	2,250,				_1,	323,63			247.
Tatal	Add lines 1s-1s (Column (d) should sould Es	ON OOM DOM V 4.		00 10/011					3 /III	, , ,

Schedule D (Form 990) 2008

Part VII Investments - Other Securities.	See Form 990, Part X, line	12.		
(a) Description of security or category (including name of security)	(b) Book value		(c) Method of valua Cost or end-of-year mai	
Financial derivatives and other financial products				
Closely-held equity interests				
Other				
Outlet				
				
	 			
				
		 		
		·		
				
		 		
Total. (Col (b) should equal Form 990, Part X, col (B) line 12)				
Part VIII Investments - Program Related.	See Form 990, Part X, line	e 13.		
(a) Description of investment type	(b) Book value		(c) Method of valua Cost or end-of-year man	
	 			
			· · · · · · · · · · · · · · · · · · ·	
	 			
		 		
Total (Col (b) should equal Form 990, Part X, col (B) line 13)				***************************************
Part IX Other Assets. See Form 990, Part X, III				······
	a) Description			(b) Book value
<u>`</u>				
				
				<u> </u>
			 	
				<u> </u>
	<u> </u>			
				
Total. (Column (b) should equal Form 990, Part X, col (B)			<u> </u>	
Part X Other Liabilities. See Form 990, Part X	X, line 25.			
(a) Description of liability		(b) Amount		
Federal income taxes				
				
			_	
			_	
			-	
Total. (Column (b) should equal Form 990, Part X, col (B)				
In Part XIV, provide the text of the footnote to the organization	zation's financial statemer	nts that reports the	organization's liability fo	or uncertain tax positions

under FIN 48. 832053 12-23-08

	edule D (Form 990) 2008 REDLANDS COUNTRY CLUB					<u>95-</u>	1427554	Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to	Fina	ncia	Statem	ents			
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1			4,581	,450.
2	Total expenses (Form 990, Part IX, column (A), line 25)			2			5,077	,401.
3	Excess or (deficit) for the year Subtract line 2 from line 1			3			<495	,951.
4	Net unrealized gains (losses) on investments			4				
5	Donated services and use of facilities			5				
6	Investment expenses			6				
7	Prior period adjustments			7				
8	Other (Describe in Part XIV)			8				
9	Total adjustments (net). Add lines 4-8			9			<u> </u>	0.
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9			10			<495	,951.
	t XII Reconciliation of Revenue per Audited Financial Stateme	ents V	Vith			eturi		
1	Total revenue, gains, and other support per audited financial statements					1	5,424	.255.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:							, 200
-	Net unrealized gains on investments	2a	1					
a h	Donated services and use of facilities	2b						
b		2c						
	Recoveries of prior year grants	2d				1		
d	Other (Describe in Part XIV)	20	_!					0
9	Add lines 2a through 2d					2e	5,424	0.
3	Subtract line 2e from line 1					3	3,424	, 233.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1.	1					
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	+	< 9.4.2	ONE			
b	Other (Describe in Part XIV)	4b		<842,	005.	1 1	-010	005
C	Add lines 4a and 4b					4c	<84Z	, <u>805</u> .>
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)		140.1			5	4,581	,450.
Pa	t XIII Reconciliation of Expenses per Audited Financial Statem	ents	With	Expense	s per	Retu		206
1	Total expenses and losses per audited financial statements					1	5,920	,206.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1	1					
а	Donated services and use of facilities	2a						
b	Prior year adjustments	2ь	ļ		<u> </u>			
C	Losses reported on Form 990, Part IX, line 25	2c	 					
ď	Other (Describe in Part XIV)	2d		842,	<u>805.</u>			
е	Add lines 2a through 2d					2e	842 5,077	<u>,805.</u>
3	Subtract line 2e from line 1					3	<u>5,07</u> 7,	<u>,401.</u>
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:							
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a						
b	Other (Describe in Part XIV)	4b						
С	Add lines 4a and 4b					4c		0.
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)	_				5	5,077	,401.
Par	t XIV Supplemental Information							
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part I	II. lines	1a an	d 4: Part IV	lines 1	b and :	2b; Part V. line	4: Part
-	rt XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.	,		,				.,
	RT X: N/A. AS PROVIDED IN FASB STAFF POSIT	ION	48-	-3, TH	E CL	UB		
HAS	ELECTED TO DEFER THE APPLICATION OF FIN	48 C	ONE	ADDIT	IONA	L Y	EAR UNT	ΙL
тнь	CLUB'S FISCAL YEAR ENDING JUNE 30, 2010.							
								
PAR	RT XII, LINE 4B - OTHER ADJUSTMENTS:							
	ATTY HIND ID GINER INDOORTIERION							
ര	ST OF GOODS SOLD							
202	71 01 000D0 D0DD			 _				
חאר	OM VIII IING ON _ OMPGO ANTHOMENMO.							
<u>LWL</u>	RT XIII, LINE 2D - OTHER ADJUSTMENTS:							

832054 12-23-08

Schedule D (Form 990) 2008	REDLANDS COUNTRY CLUB	95-1427554 Page 5
Schedule D (Form 990) 2008 Part XIV Supplemental Infor	rmation (continued)	
COST OF GOODS SOLD		
		· · · · · · · · · · · · · · · · · · ·
		
		
	-	
·		

SCHEDULE J (Form 990)

Department of the Treasury

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

▶ Attach to Form 990. To be completed by organizations that

OMB No 1545-0047

Open to Public

Inspection

Internal Revenue Service Name of the organization answered "Yes" to Form 990, Part IV, line 23.

REDLANDS COUNTRY CLUB

Employer identification number

95-1427554

<u>Pa</u>	rt I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence	,		
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision			
	of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,		1	
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply.			
	Compensation committee X Written employment contract			i
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee	ee		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a:			
а	Receive a severance payment or change of control payment?	4a	<u> </u>	X
	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a·c, list the persons and provide the applicable amounts for each item in Part III.			
	Only 501(c)(3) and 501(c)(4) organizations must complete lines 5-8.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		<u> </u>
b	Any related organization?	5b		ļ
	If "Yes," to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of			Ė
а	The organization?	6a		
b	Any related organization?	6b	ļ	
	If "Yes" to line 6a or 6b, describe in Part III.			ĺ
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments		1	
	not described in lines 5 and 6? If "Yes," describe in Part III	7	ļ	
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III			L
LHA		hedule J (Forn	n 990)	2008

Part It Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

		B) Breakdown of W	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(0)	(D)	(E)	(F)
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(B)(I)-(D)	reported in prior Form 990 or Form 990-EZ
	8	175,632.	5,000.	0	0	13,161.	193,793.	0
BRUCE ZAHN	(E)	0	0	0	0	0	0	0
	ε							
	8							
	9							
	ε							
	(ii)							
	Θ							
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				Ç			Schedu	Schedule J (Form 990) 2008

SCHEDULE O '(Form 990)

Supplemental Information to Form 990

Department of the Treasury Internal Revenue Service

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

Inspection

Name of the organization

Employer identification number

REDLANDS COUNTRY CLUB	95-1427554
FORM 990, PART VI, SECTION A, LINE 5: DURING THE CURRENT	FISCAL YEAR
REDLANDS COUNTRY CLUB CONTRACTED WITH IMPACT INTERIORS TO	COMPLETE CAPITAL
IMPROVEMENTS FOR THE CLUB. IMPACT INTERIORS (AN UNRELATED	VENDOR)
MISMANAGED AND DIVERTED APPROXIMATELY \$440,000 IN FUNDS F	OR GOODS AND
SERVICES TO SUBCONTRACTED VENDORS. REDLANDS COUNTRY CLUB	IS PROCEEDING
LITIGIOUSLY TO RECOVER LOST FUNDS. HOWEVER, THE COMPANY H	AS FILED FOR
BANKRUPTCY.	
FORM 990, PART VI, SECTION A, LINE 6: THE ORGANIZATION HA	.s
MEMBERS/SHAREHOLDERS.	
FORM 990, PART VI, SECTION A, LINE 7A: THR ORGANIZATION H	AS MEMBERS WHO
ELECT MEMBERS OF THE GOVERNING BODY AT THE ANNUAL MEETING	•
FORM 990, PART VI, SECTION A, LINE 7B: ALL ACTIONS OF THE	ORGANIZATION ARE
APPROVED AT THE ANNUAL SHAREHOLDERS' MEETING	
	
FORM 990, PART VI, SECTION A, LINE 10: THE FORM 990 IS RE	VIEWED BY THE
GENERAL MANAGER.	
FORM 990, PART VI, SECTION B, LINE 12C: OFFICERS, DIRECTO	RS, AND EMPLOYEES
SIGN A DECLARACTION DISCLOSING ANY CONFLICTS OF INTERESTS	ON AN ANNUAL
BASIS.	
	·····
FORM 990, PART VI, SECTION B, LINE 15: THE BOARD OF DIRECT	TORS NEGOTIATE

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule O (Form 990) 2008

832211 12-18-08

WRITTEN COMPENSATION AGREEMENTS WITH TOP MANAGEMENT AND KEY EMPLOYEES.

SCHEDULE O

*(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008 Open to Public Inspection

Name of the organization REDLANDS COUNTRY CLUB	Employer identification number 95-1427554
FORM 990, PART VI, SECTION C, LINE 19: THE GOVERNING DOCU	MENTS, CONFLICT
OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE	E TO THE PUBLIC
UPON REQUEST.	
FORM 990, PART XI, LINE 2C:	
AUDITED FINANCIAL STATEMENTS ARE REVIEWED AND APPROVED BY	THE GOVERNING
BODY AND BY THE GENERAL MANAGER. THE GOVERNING BODY OVERS	EES THE AUDIT
AND THE SELECTION OF AN AUDITOR.	